

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

## FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 ACCOUNT #  
(Ethics Commission Filers)

2 Total pages filed:

58

3 CANDIDATE /  
OFFICEHOLDER  
NAMEMS / MRS / MR **Ms.**FIRST **SUSAN**

MI

NICKNAME

LAST **PAMERLEAU**

SUFFIX

## OFFICE USE ONLY

Date Received

Date Hand-delivered or Postmarked

Receipt #

Date Processed

Date Imaged

FILED IN MY OFFICE  
JACQUELYN F. CALLANEN  
ELECTIONS ADMINISTRATORBEXAR COUNTY  
2012 OCT 29 PM 4:554 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESSADDRESS / PO BOX: **230 DWYER** APT / SUITE #: **#1102**  
CITY: **SAN ANTONIO** STATE: **TEXAS** ZIP CODE **78204**☐ change of address5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE PHONE NUMBER EXTENSION

**(210) 566-8920**6 CAMPAIGN  
TREASURER  
NAMEMS / MRS / MR **Mr.**FIRST **WADE**MI **B.**

NICKNAME

LAST **SHELTON**

SUFFIX

7 CAMPAIGN  
TREASURER  
ADDRESS  
(residence or business)STREET ADDRESS (NO PO BOX PLEASE): **600 NAVARRO** APT / SUITE #: **#500**  
CITY: **SAN ANTONIO** STATE: **TEXAS** ZIP CODE **78205**8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE PHONE NUMBER EXTENSION

**(210) 581-5577**

9 REPORT TYPE

☐ January 15☐ 30th day before election☐ Runoff☐ 15th day after campaign  
treasurer appointment  
(officeholder only)☐ July 15☒ 8th day before election☐ Exceeded \$500  
limit☐ Final report (Attach C/OH - FR)10 PERIOD  
COVERED

Month Day Year

THROUGH

Month Day Year

11 ELECTION

ELECTION DATE  
Month Day Year

ELECTION TYPE

☐ Primary☐ Runoff☒ General☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

BEXAS COUNTY SHERIFF

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

## FORM C/OH COVER SHEET PG 2

14 C/OH NAME

**SUSAN PAMERLEAU**

15 ACCOUNT # (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$  $\emptyset$ 2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)\$ 38,024.47<sub>xx</sub>EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED

\$  $\emptyset$ 

4. TOTAL POLITICAL EXPENDITURES

\$ 42,062.75<sub>xx</sub>CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD

\$ 36,386.85<sub>xx</sub>OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 132,000.00<sub>xx</sub>

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Susan Pamerleau*  
Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Susan Pamerleau, this the 29<sup>th</sup> day of October, 20 12, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>09.28.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ROBERT &amp; JEAN PEFFERS</b> 6 Contributor address; City; State; Zip Code <b>303 Squires Rd SAN Antonio, TX 78213</b>	7 Amount of contribution (\$) <b>\$ 50.00</b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>09.28.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>PAT HASTINGS</b> Contributor address; City; State; Zip Code <b>24385 Wildonness Oak SAN Antonio, TX 78258</b>	Amount of contribution (\$) <b>\$ 100.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>09.28.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WALTER AGUE</b> Contributor address; City; State; Zip Code <b>4231 TALLEM Woods SAN Antonio, TX 78249</b>	Amount of contribution (\$) <b>\$ 50.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>09.28.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LAWRENCE &amp; TAMARA BAKER</b> Contributor address; City; State; Zip Code <b>28402 Woodbridge Fair Oaks Ranch, TX 78015</b>	Amount of contribution (\$) <b>\$ 1,000.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>09.28.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LESLEY WENGER &amp; BOB ANDERSON</b> Contributor address; City; State; Zip Code <b>137 LouJon Circle SAN Antonio, TX 78243</b>	Amount of contribution (\$) <b>\$ 600.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**  
If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>03.12.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>GARY &amp; MARYANN HEYLAND</b>	7 Amount of contribution (\$) <b>\$ 25.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>16142 HIDDEN VIEW SAN ANTONIO, TX 78232</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>09.24.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>JESSICA &amp; DIANA HARTMAN</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>143 MONTCLAIR SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>09.28.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>K. &amp; J. MUENZLER</b>	Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>303 SINCLAIR SAN ANTONIO, TX 78222</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>09.28.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>Scott Petty, Jr.</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1027 AUSTIN HWY. #200 SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.01.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>STEVE ALLISON</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>200 MORNING SIDE SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.01.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>CAROLYN WALLACE</b> 6 Contributor address; City; State; Zip Code <b>15119 OAKSPUR ST. SAN ANTONIO, TX 78232</b>	7 Amount of contribution (\$) <b>\$ 100.00</b> P (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.03.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARY ANN HOLLINGSHEAD</b> Contributor address; City; State; Zip Code <b>P.O. Box 830885 SAN ANTONIO, TX 78283</b>	Amount of contribution (\$) <b>\$ 150.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.03.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Billie Stroud</b> Contributor address; City; State; Zip Code <b>7319 THRUSH GARDEN SAN ANTONIO, TX 78209</b>	Amount of contribution (\$) <b>\$ 25.00</b> P (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.04.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>STEPHEN A. RAUB</b> Contributor address; City; State; Zip Code <b>15703 MISSION CREST SAN ANTONIO, TX 78232</b>	Amount of contribution (\$) <b>\$ 75.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.04.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JOAN KORTE</b> Contributor address; City; State; Zip Code <b>1022 NAVARRO #405 SAN ANTONIO, TX 78205</b>	Amount of contribution (\$) <b>\$ 500.00</b> P (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2 FILER NAME <b>SUSAN PAMELLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.04.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LINDA ELLIOTT</b>	7 Amount of contribution (\$) <b>\$ 75.00</b>	8 In-kind contribution description (if applicable) <b>P</b> (If travel outside of Texas, complete Schedule T)
6 Contributor address; City; State; Zip Code <b>2420 McCullough #110 SAN ANTONIO, TX 78212</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.05.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>CLYDE POPOWICH</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>4526 Honey Locust Woods SAN ANTONIO, TX 78249</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.05.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RUDY &amp; MARY RAMIREZ, JR.</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5107 ENCANTA STREET SAN ANTONIO, TX 78233</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.05.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAMES PATTERSON</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>87 HAVERHILL WAY SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.06.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>REMIGIO &amp; MARTHA AYALA</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2430 W. GRAMERCY PL SAN ANTONIO, TX 78228</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.6.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>Charles Cockerell</b>	7 Amount of contribution (\$) <b>\$ 100.00</b>	8 In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
6 Contributor address; City; State; Zip Code <b>241 CLAY WOOD DR SAN ANTONIO, TX 78209</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.6.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JOE RUST</b>	Amount of contribution (\$) <b>\$ 75.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>101 ARCADIA PLACE #301 SAN ANTONIO, TX 78209</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.06.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WARRINGTON AUSTERMAN</b>	Amount of contribution (\$) <b>\$ 10.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>8019 CORAL MEADOW CONVERSE, TX 78109</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.7.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ALAN KRAFF</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>17211 FAWN COVE SAN ANTONIO, TX 78248</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.05.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DANNY &amp; FLO SMITH</b>	Amount of contribution (\$) <b>\$ 10.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>598 BRANDENBERGER RD MADON, TX 76856</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN CAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.18.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**ANONYMOUS**

6 Contributor address; City; State; Zip Code

7 Amount of contribution (\$)

**\$40.00**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.03.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**RONALD & BARBARA RACINOWSKI**

Contributor address; City; State; Zip Code

**205 VILLAGE DR.  
BOERNE, TX 78006**

Amount of contribution (\$)

**\$150.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.07.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**ELIZABETH BARNES**

Contributor address; City; State; Zip Code

**130 GATEWOOD COURT  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$300.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.07.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JAMES & TONI LUCAS**

Contributor address; City; State; Zip Code

**2238 ESTATE VIEW  
SAN ANTONIO, TX 78260**

Amount of contribution (\$)

**\$50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.07.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**PATRICK SWEARINGEN, JR.**

Contributor address; City; State; Zip Code

**310 ARGYLE  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$100.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.06.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**RICHARD & KATHLEEN HOLT**

6 Contributor address; City; State; Zip Code

**421 PATTERSON AVE  
SAN ANTONIO, TX 78209**

7 Amount of contribution (\$)

**\$ 250.00**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.06.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**LARRY & KELLENE DAVIS**

Contributor address; City; State; Zip Code

**231 GRANT AVE.  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$ 200.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.06.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**LON & ANN CARPENTER**

Contributor address; City; State; Zip Code

**301 EVANS AVE  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$ 150.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.08.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JOHN ALEXANDER, Jr.**

Contributor address; City; State; Zip Code

**700 N. ST. MARYS #1200  
SAN ANTONIO, TX 78205**

Amount of contribution (\$)

**\$ 200.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.08.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JOHN LOCKE, Jr.**

Contributor address; City; State; Zip Code

**100 W. HOUSTON #1452A  
SAN ANTONIO, TX 78205**

Amount of contribution (\$)

**\$ 100.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.08.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>JEAN BRADLEY</b>	7 Amount of contribution (\$) <b>\$ 75.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>505 WOODWAY LANE SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>LALAND McCORMICK</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>208 S. MANTON LN. SAN ANTONIO, TX 78213</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>KAMPREM &amp; RICHARD BROUGHTAM</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>626 NOPAL ST. SAN ANTONIO, TX 78210</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>BARRY &amp; BONNIE BANKLER</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>102 E. KINGS HWY SAN ANTONIO, TX 78212</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) <b>JAMES CALVERT</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7709 BROADWAY #202 SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMELLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.10.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>PIERRE OLIVER</b>	7 Amount of contribution (\$) <b>\$100.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>125 NEWBURY TERRACE SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>SHIRLEY COOPER</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>218 WYNDALE ST. SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>DANIEL LOVELAND</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>17300 HENDERSON PASS #240 SAN ANTONIO, TX 78232</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MANUEL &amp; INELDA TORRES</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7715 ASPEN PARK SAN ANTONIO, TX 78249</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MANUEL &amp; INELDA TORRES</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7715 ASPEN PARK SAN ANTONIO, TX 78249</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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1 Total pages Schedule A:

37

2 FILER NAME

SUSAN PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10.10.12

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

TAMMY BURR

7 Amount of contribution (\$)

\$1,000.00

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

3607 ATRIUM PEAK  
SAN ANTONIO, TX 78261

P (If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10.10.12

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

CURTIS GUNN

Amount of contribution (\$)

\$500.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

212 BROADWAY  
SAN ANTONIO, TX 78205

P (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.10.12

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

CAROLINE SEAX

Amount of contribution (\$)

\$150.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

116 ELIZABETH ANN CT.  
SAN ANTONIO, TX 78213

P (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.10.12

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

KENNETH MCCOLLISTER

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

11822 ELMSCOURT  
SAN ANTONIO, TX 78230

P (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.10.12

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

MIKE FENLON

Amount of contribution (\$)

\$100.00

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

218 ENCHANTED HILL  
SAN ANTONIO, TX 78260

P (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

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4 Date <b>10.9.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GR &amp; C CREEKMORE</b> 6 Contributor address; City; State; Zip Code <b>141 PERSIA DR SAN ANTONIO, TX 78248</b>	7 Amount of contribution (\$) <b>\$100.00</b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MELYNDA GULLEY</b> Contributor address; City; State; Zip Code <b>215 BLUE BONNET SAN ANTONIO, TX 78209</b>	Amount of contribution (\$) <b>\$100.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GIL PEREZ</b> Contributor address; City; State; Zip Code <b>P.O. Box 7221 SAN ANTONIO, TX 78201</b>	Amount of contribution (\$) <b>\$250.00</b> P (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ARTHUR RIKLIN</b> Contributor address; City; State; Zip Code <b>122 LABURNUM SAN ANTONIO, TEX. 78209</b>	Amount of contribution (\$) <b>\$250.00</b> P (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAY ROBBINS</b> Contributor address; City; State; Zip Code <b>P.O. Box 792201 SAN ANTONIO, TX 78279</b>	Amount of contribution (\$) <b>\$75.00</b> P (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.10.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>KAREN MAXFIELD</b>	7 Amount of contribution (\$) <b>\$ 25.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>2210 FM 1518 SOUTH #22 SAINT HEDWIG 78152</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.09.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MARK &amp; LORI WRIGHT</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>200 PATTERSON #514 SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>CHARLES CREEVER, JR.</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>604 RIDGEMONT AVE SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MARK &amp; MONICA DORAZIO</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>143 N. TOWER SAN ANTONIO, TX 78232</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>REAGAN HOUSTON IV</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P.O. Box 790390 SAN ANTONIO, TX 78216</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

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1 Total pages Schedule A:

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2 FILER NAME

SUSAN PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10.11.12

5 Full name of contributor

☐ out-of-state PAC (ID#)

Wayne & Cynthia HARDELL

6 Contributor address; City; State; Zip Code

P.O. Box 17065

SAN ANTONIO, TX 78217

7 Amount of  
contribution (\$)

\$ 250.00

8 In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10.11.12

Full name of contributor

☐ out-of-state PAC (ID#)

DONA PITMAN & ROBERT GILLIAN

Contributor address; City; State; Zip Code

14427 BROOK HOLLOW #306

SAN ANTONIO TX 78232

Amount of  
contribution (\$)

\$ 50.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.08.12

Full name of contributor

☐ out-of-state PAC (ID#)

CATHY SPADACCINI & GLENN KOTHMAN

Contributor address; City; State; Zip Code

23011 STARBRIGHT

SAN ANTONIO, TX 78258

Amount of  
contribution (\$)

\$ 75.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.09.12

Full name of contributor

☐ out-of-state PAC (ID#)

JOHN WORTHINGTON

Contributor address; City; State; Zip Code

239 ROSEHEART

SAN ANTONIO 78259

Amount of  
contribution (\$)

\$ 100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.11.12

Full name of contributor

☐ out-of-state PAC (ID#)

BEN WALLIS, JR.

Contributor address; City; State; Zip Code

8400 IH-10 W # 101

SAN ANTONIO, TX 78230

Amount of  
contribution (\$)

\$ 100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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**SCHEDULE A**

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1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.11.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**KENNETH TRAIN**

6 Contributor address; City; State; Zip Code

**225 KENNEDY AVE  
SAN ANTONIO, TX 78209**

7 Amount of contribution (\$)

**\$100.00**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.16.12**

Full name of contributor

☒ out-of-state PAC (ID# **000197160**)

**TEXANS FOR LA MAR SMITH**

Contributor address; City; State; Zip Code

**P.O. Box 6155  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$2,000.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.11.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**ELISA GONZALEZ**

Contributor address; City; State; Zip Code

**10918 LAMAS RUN ST.  
SAN ANTONIO, TX 78230**

Amount of contribution (\$)

**\$200.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.11.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JAMES LUNZ**

Contributor address; City; State; Zip Code

**221 OGDEN LANE  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$250.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.16.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**PAUL & ANNE SMITH**

Contributor address; City; State; Zip Code

**112 E. PECAN ST. #1800**

Amount of contribution (\$)

**\$250.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>				3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.10.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>CAL &amp; BARBARA BANKER</b>		7 Amount of contribution (\$) <b>\$ 500.00</b>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <b>230 GEDDINGTON SHAVANO PARK, TX 78249</b>		(If travel outside of Texas, complete Schedule T)			
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date <b>10.05.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>IBC PAC STATE</b>		Amount of contribution (\$) <b>\$ 1,000.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>1200 SAN BERNARDO LAREDO, TX 78040</b>		(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KAREN HIXON</b>		Amount of contribution (\$) <b>\$ 1,000.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>111 WEST LYNWOOD SAN ANTONIO, TX 78212</b>		(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>STEVEN &amp; SYLVIA HILBIG</b>		Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>6 THORNHURST SAN ANTONIO, TX 78218</b>		(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MAX JOHNSON RANCH II</b>		Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>1410 HASKIN DR. SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)			
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.10.12**

5 Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

**THOMAS & SUSAN MARBURGER**

6 Contributor address; City; State; Zip Code

**12422 AUTUMN VISTA ST.  
SAN ANTONIO, TX 78249**

7 Amount of contribution (\$)

**\$ 25.00**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.11.12**

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

**LOUIS & LINDA RIOS**

Contributor address; City; State; Zip Code

**6710 HIDDEN LAKE  
SAN ANTONIO, TX 78222**

Amount of contribution (\$)

**\$ 500.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.9.12**

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

**BILL WINTERS**

Contributor address; City; State; Zip Code

**17304 BELL NORTH DR.  
SCHERTZ, TX 78154**

Amount of contribution (\$)

**\$ 200.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.11.12**

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

**KATHY WEST GALLAGHER**

Contributor address; City; State; Zip Code

**314 E. COMMERCE ST #400  
SAN ANTONIO, TX 78205**

Amount of contribution (\$)

**\$ 75.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.12.12**

Full name of contributor

☐ out-of-state PAC (ID# \_\_\_\_\_)

**CL & BARBARA ORR**

Contributor address; City; State; Zip Code

**2531 RIM OAK  
SAN ANTONIO, TX 78232**

Amount of contribution (\$)

**\$ 50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.10.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**DEBORAH FORD**

7 Amount of contribution (\$)

8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code

**14546 BROOKHOLLOW BLVD  
#245 SA, TX 78232**

**\$ 250.00**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.12.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**MARK & SUSAN BAUER**

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

**420 GRANDVIEW  
SAN ANTONIO, TX 78209**

**\$ 50.00**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.09.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JERRY & NANCY BAILEY**

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

**2141 WEST GRAMERCY  
SAN ANTONIO, TX 78201**

**\$ 150.00**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.12.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JANELLE MACARTHUR**

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

**P.O. Box 691442  
SAN ANTONIO, TX 78269**

**\$ 100.00**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.13.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**MICHAEL & MICHELLE PASSES**

Amount of contribution (\$)

In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code

**2607 OLD GATE RD.  
SAN ANTONIO, TX 78230**

**\$ 200.00**

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.10.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KIM JERNIGAN</b>	7 Amount of contribution (\$) <b>\$ 240.00</b>	8 In-kind contribution description (if applicable) <b>OFFICE CLEANING</b>
6 Contributor address; City; State; Zip Code <b>1711 SPRINGWOOD DR SPRING BRANCH, TX 78070</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KIM JERNIGAN</b>	Amount of contribution (\$) <b>\$ 240.00</b>	In-kind contribution description (if applicable) <b>OFFICE CLEANING</b>
Contributor address; City; State; Zip Code <b>1711 SPRINGWOOD DR. SPRING BRANCH, TX 78070</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>KIM JERNIGAN</b>	Amount of contribution (\$) <b>\$ 240.00</b>	In-kind contribution description (if applicable) <b>OFFICE CLEANING</b>
Contributor address; City; State; Zip Code <b>1711 SPRINGWOOD DR. SPRING BRANCH, TX 78070</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RENE BENJAMIN</b>	Amount of contribution (\$) <b>\$ 60.00</b>	In-kind contribution description (if applicable) <b>REFRIGERATOR</b>
Contributor address; City; State; Zip Code <b>2650 THOUSAND OAKS SAN ANTONIO, TX 78232</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>STEVE BAYSINGER</b>	Amount of contribution (\$) <b>\$ 15.00</b>	In-kind contribution description (if applicable) <b>TABLE RENTAL</b>
Contributor address; City; State; Zip Code <b>26902 SPARROW RIDGE SAN ANTONIO, TX 78261</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.12.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARC MUCKLERBY</b>	7 Amount of contribution (\$) <b>\$ 150.00</b>	8 In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
6 Contributor address; City; State; Zip Code <b>8706 SILVER QUAIL SAN ANTONIO, TX 78250</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.12.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>BARBARA GENTRY</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>104 HILER ROAD SAN ANTONIO, TX 78209</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GURVINDER SINGH</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>24902 MIRANDA RIDGE BOERNE, TX 78006</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.13.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>PAUL MARTIN</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>3519 STONEHAVEN ROAD SAN ANTONIO, TX 78230</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.14.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MEGAN LEGACY</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable) <b>P (If travel outside of Texas, complete Schedule T)</b>
Contributor address; City; State; Zip Code <b>11219 JADE SPRING SAN ANTONIO, TX 78249</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A:

37

2 FILER NAME

SUSAN PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10.14.12

5 Full name of contributor

☐ out-of-state PAC (ID#)

CYNTHIA COMBS

6 Contributor address; City; State; Zip Code

314 WEST SUMMITT  
SAN ANTONIO, TX 782127 Amount of  
contribution (\$)

\$ 100.00

8 In-kind contribution  
description (if applicable)

P (If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10.14.12

Full name of contributor

☐ out-of-state PAC (ID#)

BOBBY FRAZIER

Contributor address; City; State; Zip Code

203 N. WASHINGTON ST.  
SAN ANGELO, TX 76901Amount of  
contribution (\$)

\$ 50.00

In-kind contribution  
description (if applicable)

P (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.14.12

Full name of contributor

☐ out-of-state PAC (ID#)

MAX HENLEY

Contributor address; City; State; Zip Code

116 PARKLANE DR.  
SAN ANTONIO, TX 78212Amount of  
contribution (\$)

\$ 100.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) CASH

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.11.12

Full name of contributor

☐ out-of-state PAC (ID#)

DAVID DUNBAR

Contributor address; City; State; Zip Code

11063 WHITE SANDS  
SAN ANTONIO TX 78233Amount of  
contribution (\$)

\$ 75.00

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T) CASH

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

10.10.12

Full name of contributor

☐ out-of-state PAC (ID#)

KIM JERNIGAN

Contributor address; City; State; Zip Code

1711 SPRINGWOOD DR.  
SPRING BRANCH TX 78070Amount of  
contribution (\$)

\$ 240.00

In-kind contribution  
description (if applicable)OFFICE CLEANING  
JULY

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.10.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DAVID HOLMES</b>	7 Amount of contribution (\$) <b>\$ 15.00</b>	8 In-kind contribution description (if applicable) <b>TABLE RENTAL</b> (If travel outside of Texas, complete Schedule T)
6 Contributor address; City; State; Zip Code <b>19239 RENA Trail</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MICHAEL FREEMAN</b>	Amount of contribution (\$) <b>\$15.00</b>	In-kind contribution description (if applicable) <b>FOLDING CHAIR RENTAL</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>415 DESOTO DRIVE SAN ANTONIO, TX 78448</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SHIRLEY COOPER</b>	Amount of contribution (\$) <b>\$15.00</b>	In-kind contribution description (if applicable) <b>FOLDING CHAIR RENTAL</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>218 WINDALE SAN ANTONIO, TX 78209</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.10.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAN KOEANE</b>	Amount of contribution (\$) <b>\$10.00</b>	In-kind contribution description (if applicable) <b>FOLDING CHAIR RENTAL</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>2485 HWY 46N SEGUINE, TX 78155</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.11.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>R.J. GILBERT</b>	Amount of contribution (\$) <b>\$200.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>4600 GOLD FIELD SAN ANTONIO, TX 78248</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.11.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>JOE &amp; ANTOINETTE MORELL</b>	7 Amount of contribution (\$) <b>\$100.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>1814 MORESHEAD SAN ANTONIO, TX 78231</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.12.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>ROSEMARY KOWALSKI</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>ONE TOWERS PARK LANE #1512 SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.12.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>ELIZABETH CONKLYN</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>6 LEGENDS COURT SAN ANTONIO, TX 78257</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.12.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>GEORGE &amp; MARIE ZAVISCH III</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>10418 ROCKLAND SAN ANTONIO, TX 78230</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.13.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>BETTY HOWARD</b>	Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>306 KRAMERIA SAN ANTONIO, TX 78213</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.14.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LINDA ELLSWORTH</b>	7 Amount of contribution (\$) <b>\$100.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>3702 HUNTERS POINT SAN ANTONIO, TX 78230</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.14.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JOYCE CARLSON</b>	Amount of contribution (\$) <b>\$25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>12714 TEXAS THISTLE SAN ANTONIO, TX 78253</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.14.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SHARON KEMP</b>	Amount of contribution (\$) <b>\$25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>2014 ADOBE TRAIL SAN ANTONIO, TX 78232</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.15.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WILLIAM GREEHEY</b>	Amount of contribution (\$) <b>\$1,000.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P.O. Box 780489 SAN ANTONIO, TX 78278</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.12.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WILLIAM RASCO</b>	Amount of contribution (\$) <b>\$150.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>104 IVY LANE SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.15.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>ALICE REYES</b>	7 Amount of contribution (\$) <b>\$ 25.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>13516 DUTCH MYRTLE SAN ANTONIO, TX 78232</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.15.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>VIVIAN RAY</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>9477 WINWOOD DR. BOERNE, TX 78006</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.15.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>HARRIET HOOD</b>	Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>14488 ANTONIO DR. HELOTES, TX 78023</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.16.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>LOIS OR DORIS WHITE</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>1302 DAWSON ST. SAN ANTONIO, TX 78202</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.16.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>JAMES &amp; KRISTINE ELLIS</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>407 ELIZABETH RD SAN ANTONIO, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.16.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>ROBERT JAMES</b>	7 Amount of contribution (\$) <b>\$ 50.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>3418 RIVER PATH SAN ANTONIO, TX 78230</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.16.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>LEDRU BARKER</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>13043 CHIMNEY OAK DR SAN ANTONIO, TX 78249</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.16.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MANUEL &amp; IMELDA TORRES</b>	Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>7715 ASPEN PARK DR. SAN ANTONIO, TX 78249</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.16.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MARGARET CLUCK</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>300 E. MANDALAY DR. SAN ANTONIO, TX 78212</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.16.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>THAD &amp; LYNN ZIEGLER</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P.O. Box 8298 SAN ANTONIO, TX 78208</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>				3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.17.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>R.W. CALVERT</b>		7 Amount of contribution (\$) <b>\$100.00</b>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <b>224 ALLEN ST. SAN ANTONIO, TX 78209</b>			(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>AMY PERRY</b>		Amount of contribution (\$) <b>\$50.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>419 HAPPY TRAIL SHAVANO PARK, TX 78231</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JOANNA WEIDMAN</b>		Amount of contribution (\$) <b>\$500.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>1503 LOOKOUT POINT SAN ANTONIO, TX 78260</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LAURIE KARES</b>		Amount of contribution (\$) <b>\$100.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>105 FLEETWOOD SAN ANTONIO, TX 78232</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JERRY EDER</b>		Amount of contribution (\$) <b>\$25.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>25326 BANE BERRY SAN ANTONIO, TX 78258</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.17.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>HOMER &amp; LOYETTE SCHOTT</b>	7 Amount of contribution (\$) <b>\$ 25.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>3519 WELLSRING DR. SAN ANTONIO, TX 78230</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ANDREA RODRIGUEZ</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>13159 QUEENS FOREST SAN ANTONIO, TX 78230</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JEANETTE ZEPPELIN</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>13000 VISTA DEL NORTE #217 SAN ANTONIO, TX 78216</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LINDA ELLIOTT</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>P.O. Box 461180 SAN ANTONIO, TX 78246</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>MARTY CARPENTER</b>	Amount of contribution (\$) <b>\$ 25.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>3523 WELLSRING DR. SAN ANTONIO, TX 78230</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>				3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.17.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>JUDY TYRLING</b>		7 Amount of contribution (\$) <b>\$ 30.00</b>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <b>9302 WICKHEATHER SAN ANTONIO, TX 78254</b>			(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>EDWARD &amp; LISA TREFFER</b>		Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>25675 LEWIS RANCH RD. NEW BRAUNFELS, TX 78132</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MOLLY BURKE</b>		Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>613 MORRINGSIDE DR SAN ANTONIO, TX 78209</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>JIMMY &amp; VICKI PERKINS</b>		Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>508 RIDGEMONT SAN ANTONIO, TX 78209</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>CYNTHIA &amp; STEPHEN SMITH</b>		Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>18115 VERANDA LN SAN ANTONIO, TX 78258</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.11.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAMES SALEK</b>	7 Amount of contribution (\$) <b>\$ 50.00</b>	8 In-kind contribution description (if applicable) <b>P</b> (If travel outside of Texas, complete Schedule T)
6 Contributor address; City; State; Zip Code <b>9 KINGS CASTLE SAN ANTONIO, TX 78257</b>			
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RICHARD GILES</b>	Amount of contribution (\$) <b>\$ 20.00</b>	In-kind contribution description (if applicable) <b>P</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>16026 SUMMERS PASS SAN ANTONIO, TX 78247</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>ROBERT WALTERS</b>	Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable) <b>P</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>3326 BENDING CREEK SAN ANTONIO, TX 78261</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.18.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RICHARD OTERO</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable) <b>P</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>520 E. EUCLID AVE SAN ANTONIO, TX 78212</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.18.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>WARREN BRANCH</b>	Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable) <b>P</b> (If travel outside of Texas, complete Schedule T)
Contributor address; City; State; Zip Code <b>3301 OAKWELL COURT #101 SAN ANTONIO, TX 78218</b>			
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.17.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>HARRIET &amp; Austin HELMLE</b>	7 Amount of contribution (\$) <b>\$ 150.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>401 HORIZON CREST BOERNE, TX 78006</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>CATHY GREEN</b>	Amount of contribution (\$) <b>\$ 300.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>128 GRANT AVE ALAMO HEIGHTS, TX 78209</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MARGARET CLUCK</b>	Amount of contribution (\$) <b>\$ 200.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>300 EAST MANDALAY SAN ANTONIO, TX 78212</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>JOSEPH &amp; Cyndi Krier</b>	Amount of contribution (\$) <b>\$ 500.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>15060 CADILLAC DR SAN ANTONIO, TX 78248</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#) <b>MARY ROSE BROWN</b>	Amount of contribution (\$) <b>\$1,000.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>427 STONEWOOD SAN ANTONIO, TX 78216</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.18.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**GRACIELA ROMERO**

6 Contributor address; City; State; Zip Code

**9023 JEAN VERTE  
SAN ANTONIO, TX 78250**

7 Amount of contribution (\$)

**\$100.00**

8 In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.18.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**ROBERT PARKER**

Contributor address; City; State; Zip Code

**1610 BRADBURN BEND  
SAN ANTONIO, TX 78258**

Amount of contribution (\$)

**\$50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.19.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**GERMANO HASSLOCHER**

Contributor address; City; State; Zip Code

**8520 CROWN HILL BLVD.  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$1,000.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.19.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**JAMES HASSLOCHER**

Contributor address; City; State; Zip Code

**129 HASKINS  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$2,000.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.21.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**CHARLES CERVANTES**

Contributor address; City; State; Zip Code

**201 BELKNAP PL.  
SAN ANTONIO, TX 78212**

Amount of contribution (\$)

**\$100.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.				1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>				3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.18.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>OFFICE DEPOT</b>		7 Amount of contribution (\$) <b>\$ 15.24</b>	8 In-kind contribution description (if applicable)	
6 Contributor address; City; State; Zip Code <b>13484 SAN PEDRO SAN ANTONIO, TX 78216</b>			(If travel outside of Texas, complete Schedule T)		
9 Principal occupation / Job title (See Instructions)			10 Employer (See Instructions): <b>NOTE CASH REFUND</b>		
Date <b>10.17.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DRU VAN STEENBERG</b>		Amount of contribution (\$) <b>\$ 50.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>P.O. Box 12566 SAN ANTONIO, TX 78212</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.18.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JEFF SCHACKART</b>		Amount of contribution (\$) <b>\$ 10.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>P.O. Box 460028 FORT LAUDERDALE, FL 33346</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.19.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GLENN BIGGS</b>		Amount of contribution (\$) <b>\$ 250.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>2 GLENDA LOUGH CT SAN ANTONIO, TX 78209</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		
Date <b>10.22.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LUCY &amp; MICHAEL CLARK</b>		Amount of contribution (\$) <b>\$ 75.00</b>	In-kind contribution description (if applicable)	
Contributor address; City; State; Zip Code <b>21096 PRIEST RD ELMENDORF, TX 78112</b>			(If travel outside of Texas, complete Schedule T)		
Principal occupation / Job title (See Instructions)			Employer (See Instructions)		

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# POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

## SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.10.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>DAVID &amp; DELORES MELLOTT</b> 6 Contributor address; City; State; Zip Code <b>200 PRINZ SAN ANTONIO, TX 78213</b>	7 Amount of contribution (\$) <b>\$ 25.00</b> (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.24.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GEORGE LITTLE</b> Contributor address; City; State; Zip Code <b>16211 LACANTARA PARKWAY SAN ANTONIO, TX 78256</b>	Amount of contribution (\$) <b>\$ 1,000.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.18.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>USAA EMPLOYEE PAC</b> Contributor address; City; State; Zip Code <b>9800 FREDERICKSBURG RD SAN ANTONIO, TX 78298</b>	Amount of contribution (\$) <b>\$ 1,000.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.22.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>SANDRA &amp; TOMMY WALKER</b> Contributor address; City; State; Zip Code <b>13522 CRESCENT CREEK DR SAN ANTONIO, TX 78231</b>	Amount of contribution (\$) <b>\$ 25.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.22.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>RW &amp; S JANSURE</b> Contributor address; City; State; Zip Code <b>9230 SHADOW CREEK LN. CONVERSE, TX 78109</b>	Amount of contribution (\$) <b>\$ 100.00</b> (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: <b>37</b>	
2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.23.12</b>	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JENNINE OWENS</b>	7 Amount of contribution (\$) <b>\$ 15.00</b>	8 In-kind contribution description (if applicable)
6 Contributor address; City; State; Zip Code <b>P.O. Box 460234 SAN ANTONIO, TX 78246</b>		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date <b>10.24.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>GUADALUPE MONTES</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>5318 GINGER RISE SAN ANTONIO, TX 78253</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.24.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>EDWIN MEHRMANN</b>	Amount of contribution (\$) <b>\$ 100.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>100N. SANTA ROSA #1014 SAN ANTONIO, TX 78212</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.24.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>LESLEY WENGER</b>	Amount of contribution (\$) <b>\$ 430.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>137 LOU JON CIRCLE SAN ANTONIO, TX 78213</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date <b>10.24.12</b>	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: <b>JAIME VAZQUEZ</b>	Amount of contribution (\$) <b>\$ 75.00</b>	In-kind contribution description (if applicable)
Contributor address; City; State; Zip Code <b>306 GRASSMARKET SAN ANTONIO, TX 78259</b>		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

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1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.22.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**MIKE MORETTI**

6 Contributor address; City; State; Zip Code

**100 SHADY TRAIL  
SAN ANTONIO, TX 78232**

7 Amount of contribution (\$)

**\$ 1,000.00**

8 In-kind contribution description (if applicable)

☐ (If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.23.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**EDWARD PARNELL**

Contributor address; City; State; Zip Code

**6715 CHELSEA WOOD  
SAN ANTONIO, TX 78239**

Amount of contribution (\$)

**\$ 35.00**

In-kind contribution description (if applicable)

☐ (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.23.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**SCOTT KERCHVILLE**

Contributor address; City; State; Zip Code

**14 ELON GREEN CIRCLE  
SAN ANTONIO, TX 78257**

Amount of contribution (\$)

**\$ 50.00**

In-kind contribution description (if applicable)

☐ (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.25.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**LAWRENCE WERLINE**

Contributor address; City; State; Zip Code

**4110 MODENA DR.  
SAN ANTONIO, TX 78218**

Amount of contribution (\$)

**\$ 50.00**

In-kind contribution description (if applicable)

☐ (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.18.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**FREIDA WRIGHT**

Contributor address; City; State; Zip Code

**15703 BLUE CREEK ST.  
SAN ANTONIO, TX 78232**

Amount of contribution (\$)

**\$ 25.00**

In-kind contribution description (if applicable)

☐ (If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A: **37**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4 Date

**10.24.12**

5 Full name of contributor

☐ out-of-state PAC (ID#)

**DEBRA NICHOLAS**

6 Contributor address; City; State; Zip Code

**13075 N. HUNTERS CIRCLE  
SAN ANTONIO, TX 78230**

7 Amount of contribution (\$)

**\$50.00**

8 In-kind contribution description (if applicable)

**MEET & GREET  
SUPPLIES**

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

**10.18.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**ROBERT PARKER**

Contributor address; City; State; Zip Code

**1610 BRAEBURN BEND  
SAN ANTONIO, TX 78258**

Amount of contribution (\$)

**\$50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.24.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**J. BRUCE BUGG, JR.**

Contributor address; City; State; Zip Code

**410 ELIZABETH RD.  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$1,000.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.26.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**SHARON LEWIS**

Contributor address; City; State; Zip Code

**110 STONEGATE SQ.  
BOERNE, TX 78606**

Amount of contribution (\$)

**\$ 20.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

**10.27.12**

Full name of contributor

☐ out-of-state PAC (ID#)

**BEN MCALEB**

Contributor address; City; State; Zip Code

**412 CANTERBURY HILL  
SAN ANTONIO, TX 78209**

Amount of contribution (\$)

**\$ 50.00**

In-kind contribution description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

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# **POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS**

## **SCHEDULE A**

The instruction Guide explains how to complete this form.

1 Total pages Schedule A:

37

2 FILER NAME

SUSAN PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

10.10.12

5 Full name of contributor

☐ out-of-state PAC (ID#)

ANGIE & BILL HALE

6 Contributor address; City; State; Zip Code

11519 VIRIDIAN PLACE  
HELOTES, TX 78023

7 Amount of  
contribution (\$)

\$150.00

8 In-kind contribution  
description (if applicable)

MEET & GREET

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date

10.13.12

Full name of contributor

☐ out-of-state PAC (ID#)

BECKY EDLER

Contributor address; City; State; Zip Code

25326 BANE BERRY  
SAN ANTONIO, TX 78260

Amount of  
contribution (\$)

\$200.00

In-kind contribution  
description (if applicable)

MEET & GREET

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

Full name of contributor

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

Amount of  
contribution (\$)

In-kind contribution  
description (if applicable)

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

**LOANS****SCHEDULE E**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule E:

**1**

2 FILER NAME

**SUSAN PAMERLEAU**

3 ACCOUNT # (Ethics Commission Filers)

4

TOTAL OF UNITEMIZED LOANS: ⇨ ⇨ ⇨ ⇨ ⇨ ⇨

\$

5 Date of loan

**10.07.12**

7 Name of lender

☐ out-of-state PAC (ID#: \_\_\_\_\_)**SUSAN PAMERLEAU**

9 Loan Amount (\$)

**\$ 10,000.00**

6 Is lender a financial institution?

Y ☒ N

8 Lender address; City; State; Zip Code

**230 DWYER AVE  
SAN ANTONIO, TX 78204**

10 Interest rate

**N/A**

11 Maturity date

**N/A**

12 Principal occupation / Job title (See Instructions)

13 Employer (See Instructions)

14 Description of Collateral

☒ none

15 Check if personal funds were deposited into political account

☐

16 GUARANTOR INFORMATION

17 Name of guarantor

19 Amount Guaranteed (\$)

☒ not applicable

18 Guarantor address; City; State; Zip Code

20 Principal Occupation (See Instructions)

21 Employer (See Instructions)

Date of loan

Name of lender

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Loan Amount (\$)

Is lender a financial institution?

Y N

Lender address; City; State; Zip Code

Interest rate

Maturity date

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Description of Collateral

☐ none

Check if personal funds were deposited into political account

☐

GUARANTOR INFORMATION

Name of guarantor

Amount Guaranteed (\$)

☐ not applicable

Guarantor address; City; State; Zip Code

Principal Occupation (See Instructions)

Employer (See Instructions)

**ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED**

If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.



## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>	2 FILER NAME <b>SUSAN PAMERLEAU</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>10.01.12</b>	5 Payee name <b>SANTIKOS EMBASSY CENTER</b>	
6 Amount (\$) <b>\$500.00</b>	7 Payee address; City; State; Zip Code <b>18402 U.S. HWY 281 #229 SAN ANTONIO, TX 78299</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>Office Overhead</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Rent</b>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.01.12</b>	Payee name <b>DEBRA NICHOLAS</b>	
Amount (\$) <b>\$1,750.00</b>	Payee address; City; State; Zip Code <b>13075 N. HUNTERS CIRCLE SAN ANTONIO, TX 78230</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Consulting</b>	Description (If travel outside of Texas, complete Schedule T) <b>Administration</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.01.12</b>	Payee name <b>MOREHEAD / Dotts / Rybak</b>	
Amount (\$) <b>\$2,000.00</b>	Payee address; City; State; Zip Code <b>2767 SANTA FE CORPUS CHRISTI, TX 78404</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising</b>	Description (If travel outside of Texas, complete Schedule T) <b>Services</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.01.12</b>	Payee name <b>Election Support Services</b>	
Amount (\$) <b>\$3,000.00</b>	Payee address; City; State; Zip Code <b>314 E. Houston Street #201 SAN ANTONIO, TX 78204</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>Advertising</b>	Description (If travel outside of Texas, complete Schedule T) <b>Consulting</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>		2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.01.12</b>		5 Payee name <b>PIRYX</b>			
6 Amount (\$) <b>\$ 11.25</b>		7 Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>BANKING</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.01.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 4.50</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.01.12</b>		Payee name <b>AT&amp;T</b>			
Amount (\$) <b>\$ 70.34</b>		Payee address; City; State; Zip Code <b>P.O. BOX 650574 DALLAS, TX 76265</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Office Overhead</b>		Description (If travel outside of Texas, complete Schedule T) <b>Utilities</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.02.12</b>		Payee name <b>Morehead/Dotts/Rybak</b>			
Amount (\$) <b>\$1,385.80</b>		Payee address; City; State; Zip Code <b>2767 SANTA FE Street CORPUS CHRISTI, TX 78404</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Consulting</b>		Description (If travel outside of Texas, complete Schedule T) <b>Advertising</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel in District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>		2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.02.12</b>		5 Payee name <b>Lilly &amp; Company</b>			
6 Amount (\$) <b>\$ 963.74</b>		7 Payee address; City; State; Zip Code <b>1005 Congress Ave. #910 Austin, TX 78701</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Consulting</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Fund Raising</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.03.12</b>		Payee name <b>Pirvx</b>			
Amount (\$) <b>\$ 1.13</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.04.12</b>		Payee name <b>Pirvx</b>			
Amount (\$) <b>\$ 22.50</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, TX 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.04.12</b>		Payee name <b>Pirvx</b>			
Amount (\$) <b>\$ 3.38</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, TX 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>		2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.05.12</b>		5 Payee name <b>Pirya</b>			
6 Amount (\$) <b>\$ 11.25</b>		7 Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Banking</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.06.12</b>		Payee name <b>Pirya</b>			
Amount (\$) <b>\$ 4.50</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Banking</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.06.12</b>		Payee name <b>Pirya</b>			
Amount (\$) <b>\$ 3.38</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Banking</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.06.12</b>		Payee name <b>Pirya</b>			
Amount (\$) <b>\$ 0.45</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Banking</b>		Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>		2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.07.12</b>		5 Payee name <b>PIRYX</b>			
6 Amount (\$) <b>\$ 11.25</b>		7 Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>Banking</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.07.12</b>		Payee name <b>MOREHEAN/DOTE/RVBAK</b>			
Amount (\$) <b>\$ 25,196.48</b>		Payee address; City; State; Zip Code <b>2767 SANTA FE Street CORPUS CHRISTI, TX 78404</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Consulting</b>		Description (If travel outside of Texas, complete Schedule T) <b>Advertising</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.05.12</b>		Payee name <b>Sign Busters</b>			
Amount (\$) <b>\$ 3,087.50</b>		Payee address; City; State; Zip Code <b>P.O. Box 241018 SAN ANTONIO, TX 78224</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Advertising</b>		Description (If travel outside of Texas, complete Schedule T) <b>Signage Support</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.10.12</b>		Payee name <b>MY EXPERT MARKETING</b>			
Amount (\$) <b>\$ 650.00</b>		Payee address; City; State; Zip Code <b>19315 FM 2252 GARDEN RIDGE, TX 78266</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>Consulting</b>		Description (If travel outside of Texas, complete Schedule T) <b>MEDIA MARKETING</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>	2 FILER NAME <b>SUSAN PAMERLEAU</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>10.10.12</b>	5 Payee name <b>CPS</b>	
6 Amount (\$) <b>\$ 1100.96</b>	7 Payee address; City; State; Zip Code <b>P.O. Box 2678 SAN ANTONIO, TX 78289</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>UTILITIES</b>
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.11.12</b>	Payee name <b>HEB</b>	
Amount (\$) <b>\$ 12.34</b>	Payee address; City; State; Zip Code <b>11551 WEST AVENUE SAN ANTONIO, TX 78213</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T) <b>SUPPLIES</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.11.12</b>	Payee name <b>SAMS CLUB</b>	
Amount (\$) <b>\$ 20.98</b>	Payee address; City; State; Zip Code <b>SAN ANTONIO, TX</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>EVENT EXPENSE</b>	Description (If travel outside of Texas, complete Schedule T) <b>SUPPLIES</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.09.12</b>	Payee name <b>PIRYX</b>	
Amount (\$) <b>\$ 11.25</b>	Payee address; City; State; Zip Code <b>144 2nd St. SAN FRANCISCO, CA 94105</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>BANKING</b>	Description (If travel outside of Texas, complete Schedule T) <b>Collection</b>
Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17	2 FILER NAME SUSAN PAUERLOAN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10.10.12	5 Payee name PIRYX
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6 Amount (\$) \$ 11.25	7 Payee address; City; State; Zip Code 144 2nd Street SAN FRANCISCO, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) BANKING	(b) Description (If travel outside of Texas, complete Schedule T) Collection
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.10.12	Payee name PIRYX
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Amount (\$) \$ 3.38	Payee address; City; State; Zip Code 144 2nd Street SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.10.12	Payee name PIRYX
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Amount (\$) \$ 45.00	Payee address; City; State; Zip Code 144 2nd Street SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.10.12	Payee name PIRYX
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Amount (\$) \$ 22.50	Payee address; City; State; Zip Code 144 2nd Street SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17	2 FILER NAME SUSAN PAUERLOAN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10.10.12	5 Payee name PIRYX
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6 Amount (\$) \$ 6.75	7 Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Banking	(b) Description (If travel outside of Texas, complete Schedule T) Collection
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.10.12	Payee name PIRYX
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Amount (\$) \$ 4.50	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.10.12	Payee name PIRYX
------------------	---------------------

Amount (\$) \$ 4.50	Payee address; City; State; Zip Code 144 2nd Street SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.10.12	Payee name PIRYX
------------------	---------------------

Amount (\$) \$ 1.13	Payee address; City; State; Zip Code 144 2nd Street SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Banking	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17	2 FILER NAME SUSAN PAUERLOAN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 07.01.12	5 Payee name 100 CLUB OF SAN ANTONIO
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6 Amount (\$) \$ 250.00	7 Payee address; City; State; Zip Code P.O. Box 674 SAN ANTONIO, TX 78209
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) EVENT EXPENSE	(b) Description (If travel outside of Texas, complete Schedule T) MARKETING
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.16.12	Payee name DEBRA NICHOLAS
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Amount (\$) \$ 1,750.00	Payee address; City; State; Zip Code 13075 N. HUNTERS CIRCLE SAN ANTONIO, TX 78230
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) CONSULTING	Description (If travel outside of Texas, complete Schedule T) ADMINISTRATION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.18.12	Payee name PIRYX
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Amount (\$) \$ 2.25	Payee address; City; State; Zip Code 144 2ND STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) COLLECTION
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.12.12	Payee name PIRYX
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Amount (\$) \$ 6.75	Payee address; City; State; Zip Code 144 2ND STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17	2 FILER NAME SUSAN PAUERLOAN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10.12.12	5 Payee name PIRYX
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6 Amount (\$) \$ 12.50	7 Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) BANKING	(b) Description (If travel outside of Texas, complete Schedule T) COLLECTIONS
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.11.12	Payee name PIRYX
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Amount (\$) \$ 22.50	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) COLLECTIONS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.13.12	Payee name PIRYX
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Amount (\$) \$ 11.25	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) COLLECTIONS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.14.12	Payee name PIRYX
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Amount (\$) \$ 4.50	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) COLLECTIONS
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17	2 FILER NAME SUSAN PAUERLOAN	3 ACCOUNT # (Ethics Commission Filers)
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4 Date 10.14.12	5 Payee name PIRYX
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6 Amount (\$) \$4.50	7 Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) BANKING	(b) Description (If travel outside of Texas, complete Schedule T) COLLECTIONS
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9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.14.12	Payee name PIRYX
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Amount (\$) \$2.25	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.15.12	Payee name PIRYX
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Amount (\$) \$6.75	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date 10.15.12	Payee name PIRYX
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Amount (\$) \$1.13	Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105
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PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) BANKING	Description (If travel outside of Texas, complete Schedule T) Collection
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Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>		2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.15.12</b>		5 Payee name <b>PIRYX</b>			
6 Amount (\$) <b>\$ 1.13</b>		7 Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>BANKING</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.15.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 2.25</b>		Payee address; City; State; Zip Code <b>144 2nd STREET SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.16.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 4.50</b>		Payee address; City; State; Zip Code <b>144 2nd STREET SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.17.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 2.25</b>		Payee address; City; State; Zip Code <b>144 2nd STREET SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>	2 FILER NAME <b>SUSAN PAMERLEAU</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>10.17.12</b>	5 Payee name <b>PIRYX</b>	
6 Amount (\$) <b>\$ 0.90</b>	7 Payee address; City; State; Zip Code <b>144 2ND STREET SAN FRANCISCO, CA 94105</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>BANKING</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.17.12</b>	Payee name <b>PIRYX</b>	
Amount (\$) <b>\$ 2.25</b>	Payee address; City; State; Zip Code <b>144 2ND STREET SAN FRANCISCO, CA 94105</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>BANKING</b>	Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.18.12</b>	Payee name <b>OFFICE DEPOT</b>	
Amount (\$) <b>\$ 71.88</b>	Payee address; City; State; Zip Code <b>13424 SAN PEDRO SAN ANTONIO, TX 78216</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description (If travel outside of Texas, complete Schedule T) <b>SUPPLIES</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date <b>10.18.12</b>	Payee name <b>PIRYX</b>	
Amount (\$) <b>\$ 4.50</b>	Payee address; City; State; Zip Code <b>144 2ND STREET SAN FRANCISCO, CA 94105</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>BANKING</b>	Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>		2 FILER NAME <b>SUSAN PAMERLEAU</b>		3 ACCOUNT # (Ethics Commission Filers)	
4 Date <b>10.18.12</b>		5 Payee name <b>PIRYX</b>			
6 Amount (\$) <b>\$ 2.25</b>		7 Payee address; City; State; Zip Code <b>144 2nd STREET SAN FRANCISCO, CA 94105</b>			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) <b>BANKING</b>		(b) Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>	
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.21.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 4.50</b>		Payee address; City; State; Zip Code <b>144 2nd STREET SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLLECTIONS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.21.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 3.78</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLLECTIONS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date <b>10.22.12</b>		Payee name <b>PIRYX</b>			
Amount (\$) <b>\$ 45.00</b>		Payee address; City; State; Zip Code <b>144 2nd Street SAN FRANCISCO, CA 94105</b>			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) <b>BANKING</b>		Description (If travel outside of Texas, complete Schedule T) <b>COLLECTIONS</b>	
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Event Expense  
Fees

Gift/Awards/Memorials Expense  
Legal Services  
Food/Beverage Expense  
Polling Expense  
Printing Expense

Salaries/Wages/Contract Labor  
Solicitation/Fundraising Expense  
Travel In District  
Travel Out Of District  
Office Overhead/Rental Expense

Loan Repayment/Reimbursement  
Transportation Equipment & Related Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: 17		2 FILER NAME SUSAN PAUERLOAN		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 10.22.12		5 Payee name PIRYX			
6 Amount (\$) \$ 1.58		7 Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105			
8 PURPOSE OF EXPENDITURE		(a) Category (See categories listed at the top of this schedule) BANKING		(b) Description (If travel outside of Texas, complete Schedule T) COLLECTION	
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.23.12		Payee name PIRYX			
Amount (\$) \$ 2.25		Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) BANKING		Description (If travel outside of Texas, complete Schedule T) COLLECTION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.25.12		Payee name PIRYX			
Amount (\$) \$ 2.25		Payee address; City; State; Zip Code 144 2nd STREET SAN FRANCISCO, CA 94105			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) BANKING		Description (If travel outside of Texas, complete Schedule T) COLLECTION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 10.02.12		Payee name i CONTACT CORPORATION			
Amount (\$) \$ 81.40		Payee address; City; State; Zip Code 5221 PARAMOUNT PKY #200 MORRISVILLE, NC 27560			
PURPOSE OF EXPENDITURE		Category (See categories listed at the top of this schedule) CONSULTING		Description (If travel outside of Texas, complete Schedule T) EMAIL DISTRIBUTION	
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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**POLITICAL EXPENDITURES****SCHEDULE F****EXPENDITURE CATEGORIES FOR BOX 8(a)**

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>	2 FILER NAME <b>SUSAN PAUERLOAN</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>10.9.12</b>	5 Payee name <b>AT&amp;T</b>	
6 Amount (\$) <b>\$ 14.73</b>	7 Payee address; City; State; Zip Code <b>P.O. BOX 650574 DALLAS, TX 76265</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>Utilities</b>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <b>10.16.12</b>	Payee name <b>SECURITY ONE, INC</b>	
Amount (\$) <b>\$ 29.23</b>	Payee address; City; State; Zip Code <b>716 WEST BLVD. UNIVERSAL CITY, TX 78148</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description (If travel outside of Texas, complete Schedule T) <b>SECURITY</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <b>10.18.12</b>	Payee name <b>US Postal Service</b>	
Amount (\$) <b>\$ 45.00</b>	Payee address; City; State; Zip Code <b>1150 NO. LOOP 1604W # 108 SAN ANTONIO, TX 78248</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description (If travel outside of Texas, complete Schedule T) <b>STAMPS</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		
Date <b>10.18.12</b>	Payee name <b>USAA</b>	
Amount (\$) <b>\$ 5.00</b>	Payee address; City; State; Zip Code <b>10750 McDERMOTT FWY SAN ANTONIO, TX 78288</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>OFFICE OVERHEAD</b>	Description (If travel outside of Texas, complete Schedule T) <b>BANK CHARGE</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH		
Candidate / Officeholder name		
Office sought		
Office held		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED



## POLITICAL EXPENDITURES

## SCHEDULE F

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F: <b>17</b>	2 FILER NAME <b>SUSAN PAUERLOAN</b>	3 ACCOUNT # (Ethics Commission Filers)
4 Date <b>10.9.12</b>	5 Payee name <b>GREGORY TAHUATUA</b>	
6 Amount (\$) <b>\$67.00</b>	7 Payee address; City; State; Zip Code <b>1510 HAWKS MEADOW SAN ANTONIO, TX 78248</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) <b>CONSULTING</b>	(b) Description (If travel outside of Texas, complete Schedule T) <b>ELECTION SERVICES</b>
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <b>10.26.12</b>	Payee name <b>PYRIX</b>	
Amount (\$) <b>0.90</b>	Payee address; City; State; Zip Code <b>144 2ND STREET SAN FRANCISCO, CA 94105</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>BANKING</b>	Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date <b>10.27.12</b>	Payee name <b>PYRIX</b>	
Amount (\$) <b>\$ 2.25</b>	Payee address; City; State; Zip Code <b>144 2ND STREET SAN FRANCISCO, CA 94105</b>	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) <b>BANKING</b>	Description (If travel outside of Texas, complete Schedule T) <b>COLLECTION</b>
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought      Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

**INTEREST EARNED, OTHER CREDITS/GAINS/  
REFUNDS, AND PURCHASE OF INVESTMENTS****SCHEDULE K**

The Instruction Guide explains how to complete this form.

1 Total pages Schedule K:

1

2 FILER NAME

SUSAN PAMERLEAU

3 ACCOUNT # (Ethics Commission Filers)

4 Date

5 Name of person from whom amount is received

USAA FEDERAL SAVING BANK

8 Amount  
(\$)

6 Address of person from whom amount is received; City; State; Zip Code

10750 McDERMOTT FWY  
SAN ANTONIO, TX 78288

\$0.23

7 Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

Name of person from whom amount is received

Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

Date

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Amount  
(\$)

Address of person from whom amount is received; City; State; Zip Code

Purpose for which amount is received

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED